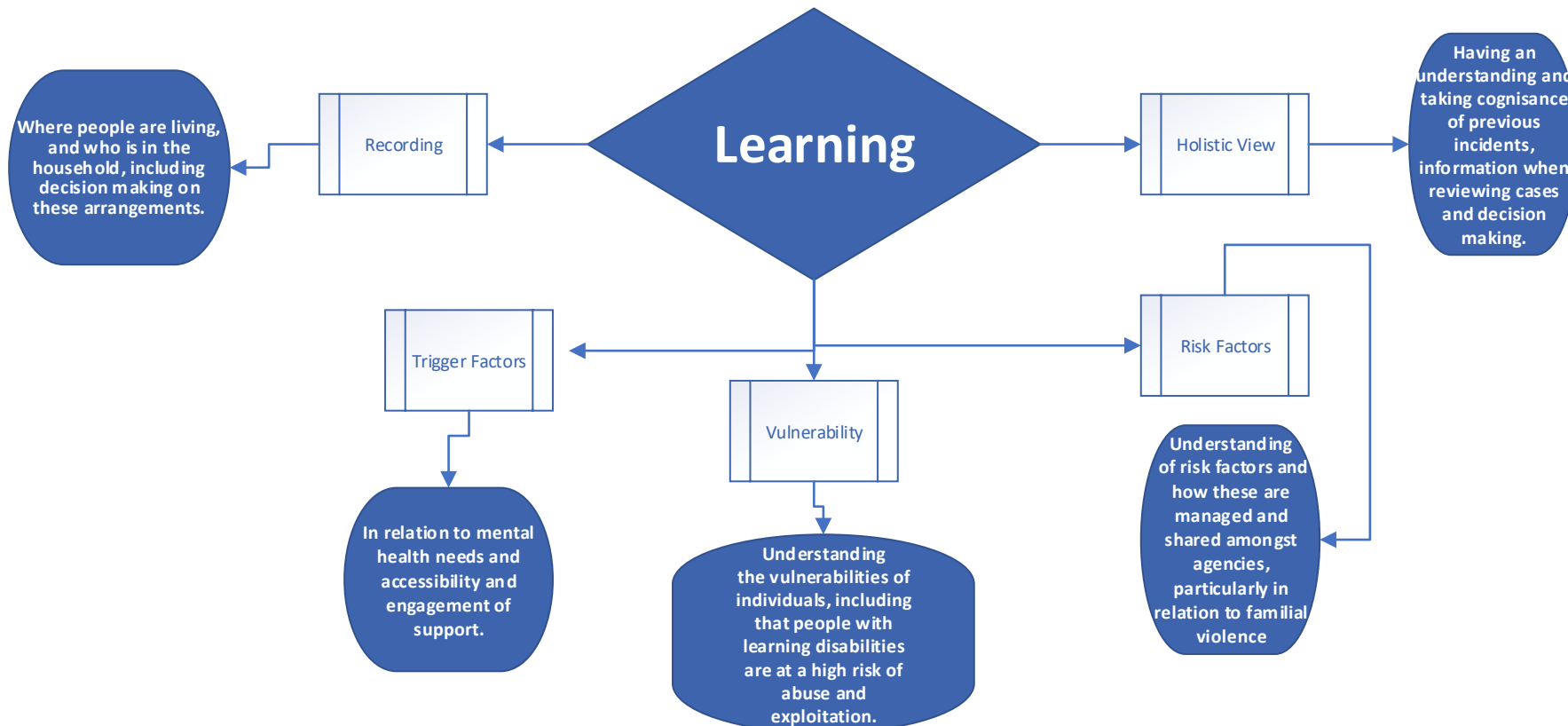


DHR Hanover Learning Briefing into the death of 'Mark'

Circumstances	<p>Mark was 37 years old and time of his death and had been living with John (his uncle) for six months prior to his death. John had agreed with this living arrangement to prevent Mark becoming homeless, but this arrangement caused anxieties for John. Safeguarding and domestic violence agencies were involved with Mark and his family. Both John and Mark had vulnerabilities: Mark - mental ill health, drug and alcohol misuse. John - mild learning disability, mental ill health and alcohol misuse.</p>
Vulnerabilities	<p>Family Abuse within the wider family relationships was not always identified. They both had vulnerabilities which impacted on their relationship. Mapping of incidents and understanding their vulnerabilities will help to gain a better perspective of the case.</p>



What agencies can do to address learning

Vulnerability

- Identify and understand the persons vulnerabilities and how it can make them more at risk from domestic abuse.
- What is your role in supporting that person, identifying vulnerabilities, sharing information with other agencies and signposting / referring to other support, accessing information. Do you undertake all of this in your role or do other team members assist and what do they need to be aware of?
- Review case history to inform decision making

Risk Factors

- Risk factors are considered and addressed when identified
- Information sharing – what is your agency doing to manage risk and what are other agencies doing?
- Review case history to inform decision making
- Identify gaps in service delivered to victim/perpetrator/other and how can this be filled.

Trigger factors (for Mental Ill health)

- Understand that persons trigger factors - if unclear speak to other agencies working with the person
- What are their needs for engagement and support
- Are there any accessibility needs
- Signpost and support accessing services, check services have been accessed and if not why not

Recording

- Accuracy of information sharing to inform multi-agency risk assessments and care planning
- Share information regarding changes in home circumstances and or family dynamics
- Understand your agency processes for assessments, including client contact details for safe contact
- Review case history to inform decision making and note what decisions were made / action was taken and why
- Record family relationships including names of people
- Record the names and relationships of people accompanying the person to appointments

Holistic view

- Share information with other agencies involved
- Review cases with senior managers – supervision / clinical case reviews
- Look at the whole picture not just incidents in isolation
- Does anyone else in the home pose a risk or could also be at risk?
- Updates on the outcomes of agency actions – your own agency and other agencies involved